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SERIAL NUMBER 10/748,010	FILING OR 371(c) DATE 12/30/2003 RULE	CLASS 424	GROUP ART UNIT 1646	ATTORNEY DOCKET NO. 58281US004
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APPLICANTS

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** CONTINUING DATA *****

cl This appln claims benefit of 60/437,398 12/30/2002

** FOREIGN APPLICATIONS *****

cl - No WE -

IF REQUIRED, FOREIGN FILING LICENSE GRANTED **

04/14/2004

Foreign Priority claimed	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY	SHEETS DRAWING	TOTAL CLAIMS	INDEPENDENT CLAIMS
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	NH	10	57	6
Verified and Acknowledged	<i>cl</i> Examiner's Signature	<i>cl</i> Initials			

ADDRESS

32692

TITLE

Immunostimulatory combinations

FILING FEE RECEIVED 1694	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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